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FACSIMILE TRANSMISSION COVER SHEET

Date: August 5, 2005

To: United States Patent and Trademark Office
Examiner: Nguyen, Toan D.; Art Unit: 2665

Fax: (703) 872-9306

Re: Application Serial No.: 09/912,283
Filing Date: 7/24/2001; First-Named Inventor: Petranovich
Attorney Docket No.: 01CON212P

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 17

Message:

Enclosed please find the Amendment and Response to Non-Final Office Action dated June 15, 2005.

Thank you.

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Attorney Docket No.: 01CON212P

AMENDMENT COVER SHEETIN RE APPLICATION OF: Petranovich, et al.SERIAL NO.: 09/912,283 FILED: 7/24/2001FOR: Multi-Mode Adaptive FilterHONORABLE COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

- No additional fee is required.
 The fee has been calculated as shown below:

<input type="checkbox"/> EXTENSION FEE	RATE Non-Small Entity	RATE Small-Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	120.00	60.00	\$
SECOND MONTH AFTER TIME PERIOD SET	450.00	225.00	\$
THIRD MONTH AFTER TIME PERIOD SET	1,020.00	510.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,590.00	795.00	\$

- TOTAL EXTENSION FEE \$ 0.00
 FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	13	MINUS **20	* = 0	x 50	x 25	\$
INDEPENDENT	2	MINUS ***3	* = 0	x 200	x 100	\$
First presentation of multiple dependent claim				+ 360	+ 180	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

- * If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.
** If the number of Total Claims previously paid for is less than 20, write "20" in this space.
*** If the number of Independent Claims previously paid for is less than 3, write "3" in this space.

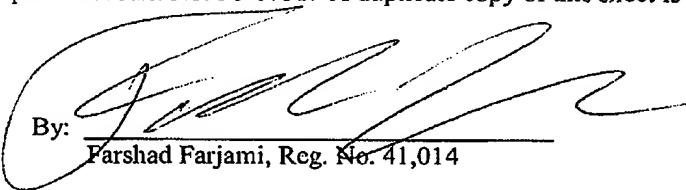
01CXT0155C

Attorney Docket No.: 01CON212P

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- Please charge Deposit Account No. 50-0731 in the amount of \$ _____
- The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

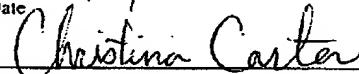
Date: 8/5/05

By:


Farshad Farjami, Reg. No. 41,014**CERTIFICATE OF FACSIMILE TRANSMISSION**

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Date

8/5/05


Signature

Christina Carter
Name of Person Performing Facsimile Transmission

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01CXT0155C

Attorney Docket No.: 01CON212P

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HONORABLE COMMISSIONER FOR PATENTS
P.O. Box 1450, Alexandria, VA 22313-1450

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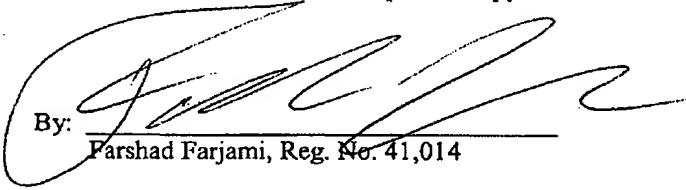
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Attorney Docket No.: 01CON212P
Serial No.: 09/912,283

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Jim E. Petranovich Serial No.: 09/912,283 Filing Date: July 24, 2001 For: Multi-Mode Adaptive Filter	Examiner: Nguyen, Toan D. Art Unit: 2665	RECEIVED CENTRAL FAX CENTER AUG 05 2005
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AMENDMENT AND RESPONSE TO NON-FINAL OFFICE ACTION

Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

This Amendment and Response is in response to the *Non-Final* Office Action, dated June 15, 2005, in the above-referenced patent application. Please enter and consider the following amendments and remarks.